
OLR Bill Analysis

sHB 5145

AN ACT CONCERNING VARIOUS REVISIONS TO THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES' STATUTES.

SUMMARY:

This bill makes several changes to mental health and addiction services (DMHAS) statutes. Among other things, it:

1. specifies that all private agencies treating psychiatric disabilities or substance abuse, regardless of whether they are state-funded, must comply with the commissioner's data collection requirements;
2. grants the commissioner authority to allow private agencies who provide housing assistance to carry over unused funds to the following year;
3. codifies existing practice by allowing DMHAS clients to receive services outside the designated mental health region where they live (§ 3);
4. codifies existing practice by requiring DMHAS, within available appropriations, to assess certain people charged with felonies to determine whether they should be referred for community-based mental health services;
5. increases information sharing concerning such arrestees and others in the criminal justice system who may need treatment; and
6. removes term limits for appointed members of the Board of Mental Health and Addiction Services.

The bill also makes minor and technical changes.

EFFECTIVE DATE: October 1, 2014

§ 1 – DATA COLLECTION

By law, the DHMAS commissioner must specify uniform methods for keeping statistical information for public and private agencies, including a client identifier system. The bill specifies that these methods apply to all public and private agencies that provide care or treatment for psychiatric disabilities or alcohol or drug abuse or dependence, including those that are not state-operated or state-funded.

The bill also specifies that the agencies or others involved in such treatment, and not the commissioner, must collect relevant statistical information and make it available. The bill requires them to report the information to DMHAS, in the form and manner the commissioner prescribes and upon her request. By law, this information includes the number of people treated, demographic and clinical information, frequency of admission and readmission, frequency and duration of treatment, level of care provided, and discharge and referral information.

§ 2 – HOUSING SUBSIDIES

Current law permits the DMHAS commissioner, within available appropriations, to provide subsidies to people who receive DMHAS services and require supervised living arrangements. The bill specifies that such subsidies are for people who qualify for supportive housing under the state's permanent supportive housing initiative, which the department operates in collaboration with several other state agencies.

The bill also gives the DMHAS commissioner the authority to permit agencies who distribute such subsidies on the department's behalf to use any unspent money for the same purpose in the following fiscal year.

§ 4 – PRE-ARRAIGNMENT ASSESSMENT

Existing law requires DMHAS, to the maximum extent possible within available appropriations, to clinically assess certain people

charged with misdemeanors, before they are arraigned. The bill codifies law to current practice by also requiring such assessments for people charged with felonies.

As under existing law, DMHAS must conduct such assessments only if the person (1) consents to the assessment and (2) previously received, or would reasonably benefit from receiving, DMHAS mental health services or substance abuse treatment. The assessment determines whether the person should be referred to community-based mental health services. If DMHAS determines that the person needs services and he or she accepts them, the department must inform the court of the assessment and recommended treatment plan for its consideration in disposing of the case.

For both felony and misdemeanor arrests, the bill allows DMHAS to disclose, to the person conducting the assessment, information on whether the arrested person has received DMHAS services.

§ 5 – EXAMINATION FOR ALCOHOL OR DRUG DEPENDENCY

By law, courts can order someone charged with a crime or awaiting sentencing to be examined for alcohol or drug dependency to determine whether the person needs treatment. DMHAS must appoint clinical examiners to conduct such examinations.

The bill requires DMHAS to disclose to such examiners information in the department's database concerning the date and location of any treatment the person received for alcohol or drug dependence so the examiner can request from DMHAS a release of treatment information.

§ 6 – BOARD OF MENTAL HEALTH AND ADDICTION SERVICES

The bill removes term limits for the 19 appointed members of the Board of Mental Health and Addiction Services. Under current law, an appointed member cannot serve more than two successive four-year terms in addition to the balance of any unexpired term remaining when he or she was appointed. By law, the board's duties include, among other things, advising the DMHAS commissioner on department programs, policies, and plans.

BACKGROUND

Related Bill

SB 364 (File 67), reported favorably by the Housing Committee, adds to the agencies with whom DMHAS must collaborate in administering the supportive housing initiative and gives the agencies more discretion in determining eligibility under the program.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 26 Nay 0 (03/10/2014)